## CENTER FOR DRUG EVALUATION AND RESEARCH

**APPLICATION NUMBER:** 

201281Orig1s000

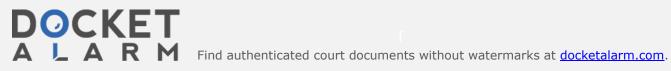
**OTHER REVIEW(S)** 



## 505(b)(2) ASSESSMENT

| Application Information   |   |  |                               |  |  |
|---|---|--|-------------------------------|--|--|
| NDA # 201281  | NDA Supplement #: N/A                             |  | Efficacy Supplement Type: N/A |  |  |
|   |   |  |                               |  |  |
| Proprietary Name: TBD   |   |  |                               |  |  |
| Established/Proper Name: Linagliptin/Metformin Hydrochloride Fixed-Dose Combination |   |  |                               |  |  |
| Dosage Form: Tablets  |   |  |                               |  |  |
| Strengths: 2.5 mg/500 mg, 2.5 mg/850 mg, 2.5 mg/1000 mg                             |   |  |                               |  |  |
| Applicant: Boehringer Ingelheim Pharmaceuticals, Inc.                               |   |  |                               |  |  |
| Date of Receipt: January 19, 2011 (resubmitted on November 30, 2011 after Complete  |   |  |                               |  |  |
| Reponse issued on November 16, 2011)  |   |  |                               |  |  |
| PDUFA Goal Date:  | PDUFA Goal Date: Action Goal Date (if different): |  | Goal Date (if different):     |  |  |
| January 30, 2012  | anuary 30, 2012                                   |  |                               |  |  |
| Proposed Indication(s): Treatment of Type 2 Diabetes Mellitus                       |   |  |                               |  |  |
|   |   |  |                               |  |  |

| GENERAL INFORMATION |  |  |  |  |  |  |
|---------------------|--|--|--|--|--|--|
| 1)                  | Is this application for a recombinant or biologically-derived product and/or protein or peptide product <i>OR</i> is the applicant relying on a recombinant or biologically-derived product and/or protein or peptide product to support approval of the proposed product? |  |  |  |  |  |
|                     | YES NO 🖂   |  |  |  |  |  |
|                     | If "YES" contact the $(b)(2)$ review staff in the Immediate Office, Office of New Drugs.   |  |  |  |  |  |



## INFORMATION PROVIDED VIA RELIANCE (LISTED DRUG OR LITERATURE)

2) List the information essential to the approval of the proposed drug that is provided by reliance on our previous finding of safety and efficacy for a listed drug or by reliance on published literature. (If not clearly identified by the applicant, this information can usually be derived from annotated labeling.)

| Source of information* (e.g.,        | Information provided (e.g.,         |  |  |
|--------------------------------------|-------------------------------------|--|--|
| published literature, name of        | pharmacokinetic data, or specific   |  |  |
| referenced product)                  | sections of labeling)               |  |  |
| Glucophage (metformin hydrochloride) | Safety and efficacy data throughout |  |  |
| tablets (NDA 020357)                 | US Prescribing Information          |  |  |
|                                      |                                     |  |  |
| Published literature                 | Use in Specific Populations -       |  |  |
|                                      | Pregnancy (Section 8.1 of label)    |  |  |

<sup>\*</sup>each source of information should be listed on separate rows

3) Reliance on information regarding another product (whether a previously approved product or from published literature) must be scientifically appropriate. An applicant needs to provide a scientific "bridge" to demonstrate the relationship of the referenced and proposed products. Describe how the applicant bridged the proposed product to the referenced product(s). (Example: BA/BE studies)

**BA/BE** studies for Glucophage

#### RELIANCE ON PUBLISHED LITERATURE

| 4) | (a) Regardless of whether the applicant has explicitly stated a reliance on published literature to support their application, is reliance on published literature necessary to support the approval of the proposed drug product (i.e., the application <i>cannot</i> be approved without the published literature)? |  |  |  |  |
|----|---|--|--|--|--|
|    | YES NO  |  |  |  |  |
|    |   |  |  |  |  |
|    | If "NO," proceed to question #5.  |  |  |  |  |
|    | (b) Does any of the published literature necessary to support approval identify a specific (e.g., brand name) <i>listed</i> drug product?  YES NO If "NO", proceed to question #5.  |  |  |  |  |
|    | If "YES", list the listed drug(s) identified by name and answer question $\#4(c)$ .   |  |  |  |  |
|    | (c) Are the drug product(s) listed in (b) identified by the applicant as the listed drug(s)? N/A  YES NO  |  |  |  |  |



## RELIANCE ON LISTED DRUG(S)

Reliance on published literature which identifies a specific approved (listed) drug constitutes reliance on that listed drug. Please answer questions #5-9 accordingly.

| 5)   | S) Regardless of whether the applicant has explicitly referenced the listed drug(s), does the application <b>rely</b> on the finding of safety and effectiveness for one or more listed drugs (approved drugs) to support the approval of the proposed drug product (i.e., the application cannot be approved without this reliance)? |                               |  |  |  |  |
|--|---|-------------------------------|--|--|--|--|
|  |   | YES<br>If " <b>NO</b> ," pro  | S  |  |  |  |
| 6)   | Name of listed drug(s) relied upon, and the NDA explicitly identified the product as being relied up  |                               | idicate if the applicant                             |  |  |  |
|  | Name of Drug  | NDA/ANDA #                    | Did applicant specify reliance on the product? (Y/N) |  |  |  |
| Glu  | cophage (metformin hydrochloride) tablets   | NDA 020357                    | Yes  |  |  |  |
| Applicants should specify reliance on the 356h, in the cover letter, and/or with their patent certification/statement. If you believe there is reliance on a listed product that has not been explicitly identified as such by the applicant, please contact the (b)(2) review staff in the Immediate Office, Office of New Drugs.  7) If this is a (b)(2) supplement to an original (b)(2) application, does the supplement rely upon the same listed drug(s) as the original (b)(2) application?  N/A ☐ YES ☐ NO ☐  If this application is a (b)(2) supplement to an original (b)(1) application or not a supplemental application, answer "N/A".  If "NO", please contact the (b)(2) review staff in the Immediate Office, Office of New Drugs. |   |                               |  |  |  |  |
| 8)   | Were any of the listed drug(s) relied upon for this a) Approved in a 505(b)(2) application?  Name of drug(s) approved in a 505(b)   | YES<br>If " <b>YES</b> ", ple | $S \square NO \boxtimes$ ase list which drug(s).     |  |  |  |
|  | b) Approved by the DESI process?  Name of drug(s) approved via the DI   |                               | $S \square NO \boxtimes$ ase list which drug(s).     |  |  |  |
|  | c) Described in a monograph?  | YES<br>If " <b>YES</b> ", ple | $S \square NO \boxtimes$ ase list which $drug(s)$ .  |  |  |  |

Name of drug(s) described in a monograph:



|     | d)   | Di   | scontinued from marketing?   | YES   |   | NO   | $\bowtie$     |
|-----|--|------|--|---|---|--|---------------|
|     |  |      | If "YES", please list which drug(s) an   |   |   | ı d) i. be   | elow.         |
|     |  |      | Name of drug(s) discontinued from marketing:   | 110 , pre   | occeu io                                    | question   | <i>t 117.</i> |
|     |  | i)   | Were the products discontinued for reasons related to sa   | afety or ef<br>YES  | fectiven                                    | ess? N/A   | <b>A</b>      |
|     |  |      | (Information regarding whether a drug has been discorreasons of safety or effectiveness may be available in the section 1.11 for an explanation, and section 6.1 for the a determination of the reason for discontinuation has not Federal Register (and noted in the Orange Book), you warchive file and/or consult with the review team. Do not statements made by the sponsor.) | ntinued from the Orange list of discout the of the other pureut the other pureut the other than | Book. I<br>continue<br>iblished<br>o resear | eting for<br>Refer to<br>d drugs.<br>in the<br>cch the |               |
| 9)  | exa  | mp   | be the change from the listed drug(s) relied upon to suppose, "This application provides for a new indication, otitises for a change in dosage form, from capsule to solution"   | media" o  |   |  |               |
|     |  |      | pplication provides for a new fixed-dose combination rmin hydrochloride, for the treatment of type 2 diabet  |   | ptin and                                    | I  |               |
| tha | it is  | equi | se of the following two questions is to determine if there i ivalent or very similar to the product proposed for approdrug in the pending application.   |   |   |  |               |
| an  | d/or   | pro  | ment of pharmaceutical equivalence for a recombinant of tein or peptide product is complex. If you answered <b>YES</b> 12; if you answered <b>NO to question #1</b> , proceed to questi  | to questio  | <b>n #1</b> , pr                            |  |               |
| 10) |  |      | here a pharmaceutical equivalent(s) to the product proposation that is already approved (via an NDA or ANDA)?  | sed in the  | 505(b)(2                                    | 2)   |               |
|     | (Pharmaceutical equivalents are drug products in identical dosage forms that: (1) contain identical amounts of the identical active drug ingredient, i.e., the same salt or ester of the same therapeutic moiety, or, in the case of modified release dosage forms that require a reservoir or overage or such forms as prefilled syringes where residual volume may vary, that deliver identical amounts of the active drug ingredient over the identical dosing period; (2) do not necessarily contain the same inactive ingredients; and (3) meet the identical compendial or other applicable standard of identity, strength, quality, and purity, including potency and, where applicable, content uniformity, disintegration times, and/or dissolution rates. (21 CFR 320.1(c)). |      |  |   |   | od;<br>ng  |               |
|     |  |      | nat for proposed combinations of one or more previously approlent must also be a combination of the same drugs.  | ved drugs,  | a pharm                                     | aceutical  |               |
|     |  |      |  | YES   |   | NO   | $\boxtimes$   |
|     |  |      | If "NO" if "YES" to (a), answer (b) and (c)  |   | -   |  |               |



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